



CASE REPORT : MACULOPAPULAR RASHES IN COVID-19

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Abstrak

Covid-19 itself still has unknown clinical manifestations. Case reports show that the disease spectrum is very large, with several target organs targeted. In general, the recorded symptoms vary from mild to severe, with some cases leading to death. The most frequently reported symptoms to include fever, cough, myalgia or weakness, pneumonia, and extreme dyspnea, although seldom reported symptoms to have headaches, diarrhea, hemoptysis, runny nose, and phlegm cough. One of the most interesting symptoms of COVID-19 is the presence of skin lesions in COVID-19 patients. This case report addresses skin lesions' development in the form of a maculopapular rash on the thirteenth day of infection with COVID-19 and the absence on the fifteenth day of regular care

Keywords: COVID-19, skin manifestation, maculopapular; rash

INTRODUCTION

Since December 2019, multiple unidentified pneumonia cases have been reported in Wuhan, China. The Chinese government and researchers have taken swift measures to track the epidemic and find mystery pneumonia's etiology. The World Health Organization (WHO) issued the new virus's terminology as Novel Coronavirus 2019 (2019-nCoV) on 12 January 2020. The WHO announced the 2019-nCoV infection status on 30 January 2020 as a public health emergency warning and became a primary international concern. WHO officially introduced the disease's terminology caused by 2019-nCoV as Corona Virus Disease 2019 (COVID-19) on 11 February 2020. On the same day, the Coronavirus Research Group (CSG) of the International Committee on Virus Taxonomy referred

to 2019-nCoV as Coronavirus 2 Severe Acute Respiratory Syndrome (SARS-CoV-2).¹⁻³

Until 17 October 2020, 39,023,292 patients in the world were infected with SARS-COV-2, with a total mortality rate of 1,099,586 people. The United States of America was the nation with the largest SARS-COV outbreak in 18,447,750 cases, 8,352,384 cases in South East Asia, 7,570,929 patients in Europe, 2,725,600 cases in the Eastern Mediterranean, and 1,249,998 cases in Africa.⁴ As part of the South East Asian region, the State of Indonesia reported 353,461 cases of 12,347 deaths on 17 October 2020.⁵⁻⁶

The clinical manifestations of Covid-19 itself are still unclear. Case reports indicate that the disease spectrum is very broad, with many target organs that

may be targeted. In general, the symptoms reported range from mild to severe, with some cases leading to death. The most commonly reported symptoms are fever, cough, myalgia or fatigue, pneumonia, and severe dyspnea, while the rarely reported symptoms include headache, diarrhea, hemoptysis, runny nose, and cough with phlegm.⁷⁻⁹ One of the interesting manifestations of COVID-19 is the appearance of skin lesions in COVID-19 patients. This case report discusses a patient with COVID-19 with skin manifestations in the form of a maculopapular rash.

CASE REPORT

CASE ILLUSTRATION

A 25-year-old woman with a head complaint of coughing and sore throat. The patient was a care worker at MAP-Hospital and had a history of interaction with a patient of COVID-19. The history of the patient's condition is presented in detail in Fig. 1. On day 13, symptoms of skin lesions appear in the lower limb region, symmetrical distribution, color erythema, lenticular scale, numerous distinct maculopapular rashes appearing

discreet, and itchy. Patients prescribed 3x10 mg oral loratadine and Nerilon cream for their skin lesions. Lesions on the skin will disappear on the 15th day of symptoms. For COVID-19, patients received a treatment regimen based on the guidelines of the Indonesian Lung Association for mild symptoms, namely: azithromycin 1x500 mg for three days, chloroquine phosphate 2x500 mg for five days, Oseltamivir 2x75 mg for five days, vitamin C 3x1 tablets, and symptomatic drugs in the form of lansoprazole 1x30 mg for five days, vectrin 2x1 tablets and Paracetamol 3x500 mg.

Laboratory tests on the 5th day of symptoms showed: hemoglobin 11.5 g / dL, hematocrit 34.8 percent, platelets 278,000 / μ L, erythrocytes 4.02 million / mm^3 , leukocytes 7500 / μ L with lymphocyte counts 40.3 percent, basophils 0.4 percent, neutrophils 50.9 percent, monocytes 7.2 percent. Neutrophil to lymphocyte ratio 1.26 and absolute lymphocyte count of 3023 cells / mm^3 .

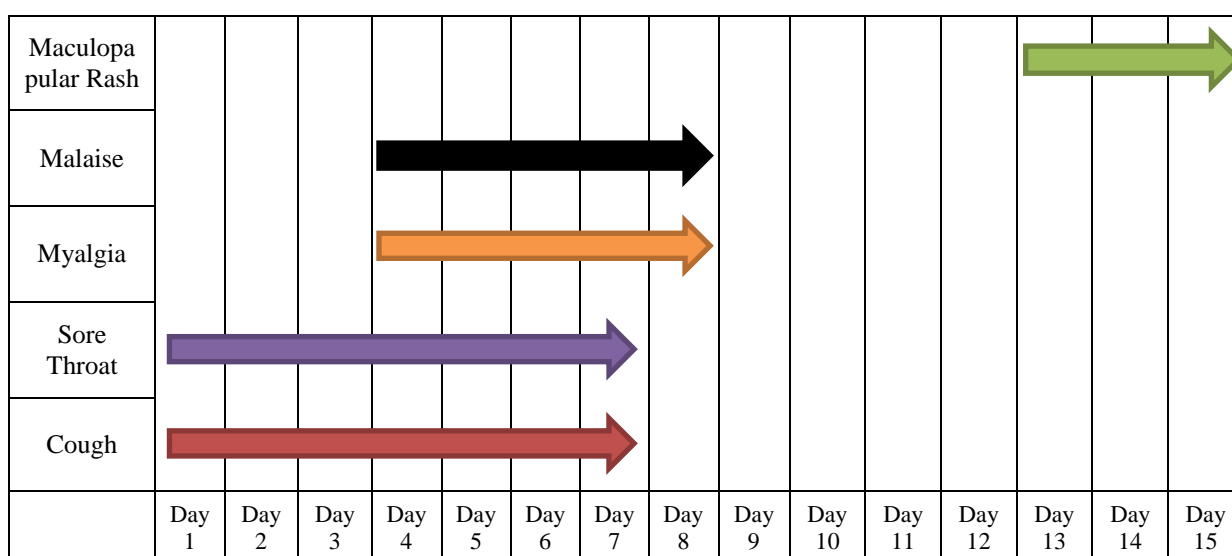


Figure 1. History of Third Patient Disease



Figure 2. Skin lesions in the lateral part of the lower extremity sinistra



Figure 3 Skin lesions in the medial portion of the lower extremities

DISCUSSION [Times New Roman ,11, bold]

Mid-August 2020 cases of Covid-19 were found to have infected all countries, even though some countries had started declaring countries free of new Covid-19 cases. Still, Covid-19 infection had to be controlled because the transmission method was simple and had very clinical symptoms. One of the clinical signs that occur is the color of the skin. Symptoms or skin lesions do not necessarily occur in all Covid-19-confirmed patients. Recalcati mentioned that only 20.45 per cent of COVID-19 patients treated at Lecco Hospital (Lombardy Region, Italy) had erythematous rash (n = 14), extensive urticaria (n = 3) or varicella-like vesicles (n = 1).¹⁰ As regards the onset of skin manifestations, the literature describes them in a very varied range. Zhao et al. examined skin lesions arising 9.92 (1-30) days after the appearance of systemic symptoms such as fever, cough, diarrhea, exhaustion, fatigue, lethargy, and

trouble breathing.¹¹ The multiple efflorescences of the skin manifestations caused by Covid-19 make it difficult to identify Covid-19 due to its manifestations identical to other diseases.

The various efflorescences of the skin manifestations caused by Covid-19 make it challenging to classify Covid-19 because of its manifestations that resemble other diseases. Joob et al. reported a petechial rash in a COVID-19 patient from Thailand.¹² The Italian study reported on varicella-like lesions¹⁰. Fernandez (Spain) said the appearance of urticaria rash (urticaria from inflammation) after six days of symptom onset.¹³ Zhang (China) reported urticaria lesions.¹⁴ Estebanez (Spain) reported a pruritic lesion of the heel.¹⁵ Henry (France) reported urticarial lesions and disseminated erythematous plaques eruption.¹⁶ Sachdeva (Italy) reported maculopapular lesions, morbilliform spots, and hemorrhagic macular patches.¹⁷ Mazzota (Italy) reported round red-

purple lesions measuring 5-15 mm with indistinct margins on the feet' soles.¹⁸ Alramthan (Qatar) reported bilateral ischemic lesions on the acral with purplish-red color on the fingers' dorsal part.¹⁹

SIMPULAN

The manifestations of COVID-19 on the skin are very diverse. This case report discusses skin lesions appearance in the form of a maculopapular rash on the thirteenth day of COVID-19 infection and the disappearance of the fifteenth day with routine treatment.

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